



COPY/INSPECTION REQUEST

FOR DOCUMENTS THAT DO NOT CONTAIN PERSONAL INFORMATION

Date: _____

Document number(s): _____

Requested by: _____

NOTES/ADDITIONAL INFORMATION:

For Recorder's Office staff use only

Copy fee (\$1.00 per page): _____ Certification fee (\$4.00 per document): _____

Completed by: _____ Receipt #(s): _____

Documents Received by (Name & Date): _____

- Emailed or Faxed to: _____
- Copies of Documents Attached

MARNEY HANSEN MARTINEZ, RECORDER
WWW.STOREYCOUNTY.ORG/RECORDER